PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

DP-308423

		CLAIMS AS	SMALL ENTITY				OTHER THAN					
						mn 2)		TYPE [OR	SMALL	
TOTAL CLAIMS			31				-	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		* /		·	X\$ 9=		OR	X\$18=	198
INDEPENDENT CLAIMS			4 minus 3 = *					X43=		OR	X86=	86
ML	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	_
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1054
CLAIMS AS AMENDED - PART II											OTHER	
	,	(Column 1)				(Column 3)	. ,	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	,	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL		! !	TOTAL	
								ADDIT. FEE		OR ,	ADDIT. FEE	
		(Column 1) CLAIMS	т т	(Colum		(Column 3)	l r					
ENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	i	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					لللب		. 4.45			200-	
								+145= TOTAL		OR	+290= TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										_		
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		. t	X86=	
٦	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM		 -			OR		
* 11	t the entry in colur	L	+145=		OR	+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, nter "20." ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		iber Pr viously Paid					r four	nd in the ann	ropriate box	in colu	ımn 1.	1